

COVID-19 Evidence Bulletin

22nd April 2021

Details of new guidance and evidence relating to the response to COVID-19. Please check SaTH, NHS and Government guidance in conjunction with these resources where necessary.

Coexisting Conditions

Guidelines recommend measures to manage acute and chronic conditions during the COVID-19 pandemic: updated [evidence summary from BMJ Best Practice]

[Further guidelines have been published to inform the management of patients with coexisting conditions during the COVID-19 pandemic. Updates within the following topics: Patients requiring anticoagulation; Mental health of children and adolescents; Acute kidney injury; Community-acquired pneumonia; Hospital-acquired pneumonia; Learning disability; Non-ST-elevation myocardial infarction (NSTEMI); Palliative care; ST-elevation myocardial infarction (STEMI); Tuberculosis.]

Available [here](#) [NHS OpenAthens account required for off-site access]. Last updated 16th April

Drug Therapy

Inhaled budesonide in the treatment of early COVID-19 (STOIC): a phase 2, open-label, randomised controlled trial [Ramakrishnan S. *The Lancet Respiratory Medicine*]

[Early administration of inhaled budesonide reduced the likelihood of needing urgent medical care and reduced time to recovery after early COVID-19.]

Available [here](#)

The role of antirheumatics in patients with COVID-19 [Nissen CB. *The Lancet Rheumatology*]

[In this Review, we provide an overview of what is currently known about the efficacy and safety of antirheumatic therapies for the treatment of patients with COVID-19. Dexamethasone has been shown to reduce COVID-19 related mortality, interleukin-6 inhibitors to reduce risk of cardiovascular or respiratory organ support, and baricitinib to reduce time to recovery in hospitalised patients requiring oxygen support.]

Available [here](#)

Health Services Restoration and Renewal

The road to renewal: five priorities for health and care [King's Fund]

[Sets out five priorities to help guide the approach to renewal across health and care - putting the workforce centre stage, a step change on inequalities and population health, lasting reform for social care, embedding and accelerating digital change, reshaping the relationship between communities and public services]

Available [here](#). Updated 8th April

2021/22 priorities and operational planning guidance [NHS England]

[Our priorities for the year ahead: A. Supporting the health and wellbeing of staff and taking action on recruitment and retention B. Delivering the NHS COVID vaccination programme and continuing to meet the needs of patients with COVID-19 C. Building on what we have learned during the pandemic to transform the delivery of services, accelerate the restoration of elective and cancer care and manage the increasing demand on mental health services D. Expanding primary care capacity to improve access, local health outcomes and address health inequalities E. Transforming community and urgent and emergency care to prevent inappropriate attendance at emergency departments (ED), improve timely admission to hospital for ED patients and reduce length of stay F. Working collaboratively across systems to deliver on these priorities.]

Available [here](#)

Long COVID

Prevalence of ongoing symptoms following coronavirus (COVID-19) infection in the UK [Office for National Statistics]

[Estimates of the prevalence of 'long COVID' in the UK, using Coronavirus (COVID-19) Infection Survey data to 6 March 2021. Over the four-week period ending 6 March 2021, an estimated 1.1 million people in private households in the UK reported experiencing long COVID (symptoms persisting more than four weeks after the first suspected coronavirus (COVID-19) episode that are not explained by something else).]

Available [here](#)

Living with Covid19 – second review [National Institute for Health Research]

[A dynamic review of the evidence around ongoing Covid19 (often called Long Covid). “The complexity of needs in some people with Long Covid mirrors the needs of people with multiple long-term conditions who benefit from a holistic, integrated approach rather than symptom by symptom management. Many people with Long Covid complain of fragmented care and 23% of our survey respondents wanted a case worker/key worker to co-ordinate care.”]

Available [here](#)

Long COVID In Adults at 12 Months After Mild-to-Moderate SARS-CoV-2 Infection [Boscolo-Rizzo P et al. *medRxiv*]

[More than half of patients with previous mild-to-moderate symptomatic COVID-19 complained the persistence of at least one symptom 12-months after the onset of the illness.]

Available [here](#). This article is a pre-print and has not been peer-reviewed

Health related quality of life in COVID-19 survivors discharged from acute hospitals: results of a short-form 36-item survey [Saverino A. *F1000 Research*]

[COVID-19 survivors particularly the ones of working age may need support for resuming their premorbid level of functioning and returning to work.]

Available [here](#). This article has not yet been peer-reviewed

Persistent post-covid symptoms in healthcare workers [Gaber T A-Z K. *Occupational Medicine*]

[Our data suggest that about a third of HCW who responded to the survey were still struggling to cope with the symptoms of what is now known as long covid several months after the acute COVID-19 infections. The overwhelming majority of this group seem to be reluctant to neither seek medical advice nor take sick leave.]

Available [here](#)

Seeing through brain fog: disentangling the cognitive, physical, and mental health sequelae of COVID-19 [Wild C et al. *Research Square*]

[These findings suggest that the subjective experience of “long COVID” or “brain fog” relates to a combination of physical symptoms and cognitive deficits]

Available [here](#). This article is a pre-print and has not been peer-reviewed

Recommendations for the Recognition, Diagnosis, and Management of Patients with Post COVID-19 Condition ('Long COVID'): A Delphi Study [Nurek M et al. *The Lancet Preprints*]

[Long covid clinics need to operate not in isolation but in the context of rapidly evolving practice amongst both GPs and specialists. Care pathways in holistic care, investigation of specific complications, management of potential symptom clusters in cardiac disease, dysautonomia and mast cell disorder, and individualised rehabilitation are needed.]

Available [here](#). This article is a pre-print and has not been peer-reviewed

Fresh evidence of the scale and scope of long covid [editorial] [Sivan M. *BMJ*]

Available [here](#)

Rehabilitation

Rehabilitation of adults who are hospitalised due to acute Covid-19 or long Covid: physiotherapy service delivery [Chartered Society of Physiotherapy]

[These standards cover rehabilitation for adults of 18 years and over who are admitted to hospital with Covid-19. This encompasses people with acute Covid-19 or long Covid. Version 2, updated 1 April.]

Available [here](#)

Rheumatology

COVID-19 rapid guideline: rheumatological autoimmune, inflammatory and metabolic bone disorders [NICE]

[On 31 March 2021, NICE integrated content from the NHS England specialty guide on rheumatology during the coronavirus pandemic into this guideline. This includes information on making treatment decisions based on the person’s condition and their medicines, advice on shielding and self-isolation, and recommendations on organising services based on COVID-19 prevalence.]

Available [here](#)

Staff Wellbeing and Engagement

Chart of the week: The work-related stress of NHS staff during Covid-19 [Nuffield Trust]

[Looks at the most recent NHS staff survey – carried out last September when coronavirus cases were fewer – to compare the experiences of staff who had worked on a ward or other setting that cared for Covid-19 patients with those who had not]

Available [here](#)

Surgery

SARS-CoV-2 infection, COVID-19 and timing of elective surgery [ICM Anaesthesia COVID-19]

Available [here](#)

Vaccination

Use of the AstraZeneca COVID-19 vaccine: JCVI statement [Department of Health and Social Care]
[Statement from the Joint Committee on Vaccination and Immunisation (JCVI) on the use of the AstraZeneca COVID-19 vaccine.]

Available [here](#)

KnowledgeShare Evidence Alerts

KnowledgeShare contains many updates on COVID-19 that can be accessed from the KnowledgeShare website without a password. If you'd like to receive these by email (along with updates on any other topics of interest) please complete the [form](#).

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